ISSUE SLIP STAPLE AREA (for additional cross references) POSITION INITIALS ID NO. DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** BEST AVAILABLE COPY RESPONSE FORMALITY REVIEW **INDEX OF CLAIMS** Rejected Non-elected Allowed Interference (Through numeral)... Canceled Restricted O Objected Date Claim Date Claim Date Original Original If more than 150 claims or 10 actions staple additional sheet here

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(LEFT INSIDE)